UNITED STATES DISTRICT COURT	
NORTHERN DISTRICT OF NEW YORK	
BRENDA R.,	
,	
Plaintiff,	
,	
V.	

COMMISSIONER OF SOCIAL SECURITY,

Defendant.

LAW OFFICES OF KENNETH HILLER, PLLC

Counsel for the Plaintiff 269 Reserve Road West Seneca, New York 14224

APPEARANCES:

SOCIAL SECURITY ADMINISTRATION Counsel for the Defendant J.F.K. Federal Building, Room 625 15 New Sudbury Street Boston, Massachusetts 02203

MIROSLAV LOVRIC, United States Magistrate Judge

TIMOTHY SEAN BOLEN, ESQ. Special Assistant U.S. Attorney

ANTHONY J. ROONEY, ESQ.

5:20-cv-0735

OF COUNSEL:

(ML)

ORDER

Currently pending before the Court in this action, in which Plaintiff seeks judicial review of an adverse administrative determination by the Commissioner of Social Security, pursuant to 42 U.S.C. §§ 405(g) and 1383(c)(3), are cross-motions for judgment on the pleadings.¹ Oral

This matter, which is before me on consent of the parties pursuant to 28 U.S.C. § 636(c), has been treated in accordance with the procedures set forth in General Order No. 18. Under that General Order once issue has been joined, an action such as this is considered procedurally, as if cross-motions for judgment on the pleadings had been filed pursuant to Rule 12(c) of the Federal Rules of Civil Procedure.

argument was heard in connection with those motions on February 28, 2022, during a telephone

conference conducted on the record. At the close of argument, I issued a bench decision in

which, after applying the requisite deferential review standard, I found that the Commissioner's

determination was supported by substantial evidence, providing further detail regarding my

reasoning and addressing the specific issues raised by Plaintiff in this appeal.

After due deliberation, and based upon the Court's oral bench decision, which has been

transcribed, is attached to this order, and is incorporated herein by reference, it is

ORDERED as follows:

1) Plaintiff's motion for judgment on the pleadings (Dkt. No. 19) is DENIED.

2) Defendant's motion for judgment on the pleadings (Dkt. No. 20) is GRANTED.

3) The Commissioner's decision denying Plaintiff Social Security benefits is

AFFIRMED.

4) Plaintiff's Complaint (Dkt. No. 1) is DISMISSED.

5) The Clerk of Court is respectfully directed to enter judgment, based upon this

determination, DISMISSING Plaintiff's Complaint in its entirety and closing this case.

Dated: March 3, 2022

Binghamton, New York

Miroslav Lovric

United States Magistrate Judge

Northern District of New York

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UNITED STATES DISTRICT COURT

NORTHERN DISTRICT OF NEW YORK

BRENDA R.

vs. 5:20-CV-0735

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Transcript of Order and Decision February 28, 2022

The HONORABLE MIROSLAV LOVRIC Presiding.

A P P E A R A N C E S

For Claimant: ANTHONY ROONEY, ESQ.

For Defendant: TIMOTHY BOLEN, ESQ.

Ruth I. Lynch, RPR, RMR, NYSRCR Official United States Court Reporter Binghamton, New York 13901

THE COURT: Well, let me begin by indicating first that the plaintiff has commenced this proceeding pursuant to Title 42 United States Code Sections 405(g) and 1383(c) to challenge the adverse determination by the Commissioner of Social Security finding that she was not disabled at the relevant times and therefore ineligible for the benefit that she sought.

By way of background, the Court sets forth the following fact and factors.

First, plaintiff was born in 1973. She is currently approximately 48 years of age. She was 41 years old at the alleged onset of her disability on June 25th of 2015.

Plaintiff lives with her two adult sons in Syracuse, New York. She has a driver's license but can no longer drive herself because of an issue with her leg.

Plaintiff stands approximately five feet one inch.

Plaintiff has an 11th grade education and is not a high school graduate.

Plaintiff's work history includes that plaintiff has not engaged in substantial gainful activity since

June 25 of 2015, the alleged onset date, and her past work experience was as a housekeeping cleaner. Transferability is not an issue because the plaintiff's past relevant work is unskilled.

Disimbile suffers from the fellowing sources
Plaintiff suffers from the following severe
impairments: Degenerative disc disease of the lumbar spine;
lumbar radiculopathy; right posterior tibial tendinitis,
status post osteotomy of the right heel bone; and obesity.
She states that she has been that she has disabling back
injury with symptoms of chronic back pain and lower
extremity inflammation.
Plaintiff is prescribed the following medications:
Cyclobenzaprine, Diclofenac, tramadol, VINOCA, Xanax, and
oxymorphone.
Plaintiff states that she is limited performing
light activities and that her children help her with
household tasks when needed.
Procedurally, the Court notes the following as far
as the procedural history of this case:
Plaintiff applied for Title II and Title XVI
benefits on June 29 of 2015, alleging an onset date of
June 25th of 2015.
In support of her claim for disability benefits,
plaintiff claims disability based on lumbar spine
impairments that prevent her from sitting and standing for
extended periods of time and prevent her from lifting.
Administrative Law Judge Jeremy G. Eldred
conducted a hearing on November 2nd, 2017, to address
plaintiff's application for bonofits. ALT Eldred issued an

unfavorable decision on March 16th of '18.

Administration Appeals Council denied plaintiff's application for review. Plaintiff appealed to the U.S. District Court for the Northern District of New York, where the parties stipulated to a remand on August 21st of 2019.

On December 19th of 2018, the Social Security

On September 25th, 2019, the Appeals Council issued a remand order. A second hearing was held on February 3rd of 2020. ALJ Eldred issued a second unfavorable decision on March 6th of 2020.

In his decision, ALJ Eldred applied the familiar five-step test for determining disability. See administrative transcript record at pages 499 through 510.

At step one, he concluded that plaintiff had not engaged in substantial gainful activity since June 25 of 2015, the alleged onset date of disability.

At step two, he concluded that plaintiff suffers from severe impairments that impose more than minimal limitations on her ability to perform basic work activities, specifically degenerative disc disease of the lumbar spine, quote/unquote back injury; lumbar radiculopathy; right posterior tibial tendinitis; status post osteotomy of the right heel bone; and obesity. The ALJ also considered the

mental impairment of anxiety disorder.

At step three ALJ Eldred concluded that plaintiff's conditions do not meet or medically equal any of the listed presumptively disabling conditions set forth in the Commissioner's regulations, and focusing on listing 1.02, which was a listing regarding major dysfunction of a joint; listing 1.03, which is reconstructive surgery or surgical arthrodesis of a major weight bearing joint; also listing 1.04, which is disorders of the spine; and listing 11.14, which is a listing regarding peripheral neuropathy.

At step four, the ALJ next determined that plaintiff obtains the residual functional capacity, also known as RFC, to perform the full range of sedentary work as defined in 20 CFR sections 404.1567(a) and 416.967(a).

The ALJ concluded that plaintiff could not perform her past relevant work as a cleaner. The ALJ therefore proceeded to step five.

At step five the ALJ concluded that based on RFC for the full range of sedentary work and considering plaintiff's age, education, and work experience, a finding of not disabled was directed by Medical-Vocation Rules 201.24 and 201.18.

Now, as the parties know, the Court's functional role in this case is limited and extremely deferential. I

must determine whether correct legal principles were applied and whether the determination is supported by substantial evidence, defined as such relevant evidence as a reasonable mind would find sufficient to support a conclusion. As the Second Circuit noted in Brault V. Social Security

Administration Commissioner, that's found at 683 F.3d 443, a 2012 case, the Second Circuit noted the standing is demanding, more so than the clearly erroneous standard.

The Court also noted in Brault that once there is a finding of fact, that fact can be rejected only if a reasonable fact-finder would have to conclude otherwise.

Now, generally speaking plaintiff raises two arguments on appeal. First, plaintiff argues that the ALJ erred in assigning significant weight to Dr. Ganesh. Plaintiff argues that Dr. Ganesh examined her more than four years before the hearing and her condition deteriorated thereafter. Plaintiff also argues that Dr. Ganesh did not have any images of plaintiff's spine when she evaluated plaintiff. In addition, plaintiff argues that the ALJ did not follow the Appeals Council's remand order to complete the administrative record in accordance with the regulatory standards regarding consultative examinations and medical evidence.

Second, plaintiff argues that the ALJ improperly evaluated her subjective complaints because, in addition to

difficulty lifting, walking, and standing, she had problems sitting for prolonged periods of time and needed to change position. Plaintiff argues that the ALJ discounted her subjective complaints because she testified to driving and doing housework, but plaintiff also reported that she required breaks and needed the assistance of others for many of these activities.

The Court provides the following analysis in connection with this case. An RFC represents plaintiff's maximum ability to perform sustained work activities in an ordinary setting on a regular and continuing basis, meaning eight hours a day for five days a week, or an equivalent schedule. An RFC determination is informed by consideration of all relevant medical and other evidence and, of course, to pass muster, must be supported by substantial evidence.

Because the application in this case was filed before March 27th of 2017, the regulations that were in effect at that time control the weight to be given to medical opinions.

Here, the ALJ explained his reasoning for assigning significant weight to the opinion of Dr. Ganesh that plaintiff had, quote/unquote, no gross limitations in sitting, standing, and walking, and mild limitations in lifting, carrying, pushing, and pulling, end of quote. See administrative transcript at page 508.

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The ALJ noted that Dr. Ganesh examined plaintiff and her findings, quote, are generally consistent with the claimant's chronic pain, medical imaging, and presentation during physical examinations, end quote. The ALJ explained that he did not give greater weight to this opinion of Dr. Ganesh because the finding that the claimant has no limitations in standing and walking is inconsistent with the claimant's history of chronic pain, obesity, and lower extremity impairments.

The Court also notes that the ALJ's RFC was more restrictive than Dr. Ganesh's opinion. Quote: Remand is generally not warranted where the ALJ's RFC finding is more restrictive than the limitations set forth in the medical opinion of record. See Lesanti versus Commissioner of Social Security, 19-CV-0121, that can be found at 2020 West Law 500986 at page 6, and that's a Western District New York January 30th of 2020 case. And in that case, quote, there is nothing improper about an ALJ considering medical opinion evidence that assesses, say, few or no exertional limitations, and then relying in part on the combined force of other record evidence, such as a claimant's subjective testimony, to nevertheless choose to assign certain limitations that result in a more restrictive RFC finding, end of quote. See also Tammy Lynn B. versus Commissioner of Social Security, 382 F.Supp 3d 184 at page 195, and that's a

Northern District New York 2019 case.

Here in this case, the ALJ applied more physical limitations than Dr. Ganesh recommended. For example, Dr. Ganesh opined that plaintiff had mild limitations in lifting, carrying, pushing, and pulling, see administrative transcript at page 508, while the ALJ limited plaintiff to sedentary work which under 20 CFR sections 404.1567(a) and 416.967(a), which limits her to lifting and carrying no more than 10 pounds and occasionally lifting or carrying articles like docket files, ledgers, and small tools.

In addition, although Dr. Ganesh did not consider images of plaintiff's spine in formulating the opinions regarding plaintiff's limitations, a consultative examiner is not required to obtain or review laboratory reports or treatment records. See Wright V. Berryhill, 687 Fed Appendix 45 at page 48, that's a Second Circuit 2017 case. Moreover, as defendant set forth in her brief, the images of plaintiff's lumbar spine exist in the record alongside observations of generally normal physical functioning. See Amos V. Commissioner of Social Security, 18-CV-1367, that's a 2020 West Law at 1493888 at pages 4 through 5, a Western District New York March 27th of 2020 case; and therein holding that the opinion of a consultative examiner who did not review the plaintiff's MRI could constitute substantial evidence to support the ALJ's physical RFC determination,

where physicians who did have access to the MRI consistently reported normal findings on examination and did not provide any functional limitations in their reports.

Further, this Court notes that the remand order stated that additional evidence may include, if warranted and available, an appropriate physical consultative examination and medical source statement about what the claimant can still do despite the impairments. As a result, the ALJ had discretion to further develop the record with an updated consultative examination, and the ALJ did not err by electing not to do so.

Now turning to the next issue, if the plaintiff has an impairment that could reasonably be expected to cause her alleged symptoms, then the ALJ must consider but not necessarily accept the alleged symptoms. See 20 CFR sections 404.1529(c)(1) and 416.929(c)(1).

Here in this case, when analyzing the subjective claims of a plaintiff, the ALJ followed SSR 16-3p, which details a two-step analysis. At step one, the ALJ determined that plaintiff has medically determinable impairments that can reasonably be expected to cause the symptoms that she described.

At step two, the ALJ evaluated the intensity and persistence of plaintiff's symptoms and determined that the evidence does not fully support her allegations regarding

complaints.

the extent of the functional limitations caused by other symptoms. For example, the ALJ noted that plaintiff could bathe herself and clean her home and do laundry in 2015; that she walked for exercise; and, with some assistance from her children, cooked and did laundry. In addition, the ALJ stated that during plaintiff's most recent pain management appointment in January 2020 her back pain was only mild to moderate in severity and that she presented as comfortable, with a normal gait, normal posture, no muscle spasms, no muscle atrophy of the lower extremity, and normal strength and sensation. See administrative transcript at page 501.

The ALJ properly evaluated plaintiff's subjective

In conclusion, it's the decision of this order, this Court, I should say, that I find that correct legal principles were applied and substantial evidence supports the ALJ's determination. As a result, plaintiff's motion for judgment on the pleadings is denied; defendant's motion for judgment on the pleadings is granted; plaintiff's complaint is dismissed; and the Commissioner's decision denying plaintiff benefits is hereby affirmed.

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